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SECRETARY OF STATE CIVISION OF CORPORATIONS

Amund 10.31.13

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Castillo Grand Hotel Condominion Residences Association DOCUMENT NUMBER: 26-0404353 (Taxid)
DOCUMENT NUMBER: 26-0404353 Taxid)
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
The Pitz- Carlton Tet Landerdale (Firm/Company)
1 North Fort Landerdale Beach Blud. (Address)
Tet Jardedele Fl 33354 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at (981) 357 6448 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
Status Certificate of Status (Additional copy is enclosed) Status Certified Copy (Additional Copy is Enclosed) Status Certified Copy (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



RECEIVED

13 OCT 30 PM 2: 35

FLORIDA DEPARTMENT OF STATE Division of Corporations LEMARTHEN OF STAGE OND HAND OF CORPORATIONS THE LABORSE FOR HEAD

September 25, 2013

MINQUE SORIANO THE RITZ-CARLTON 1 NORTH FORT LAUDERDALE BEACH BLVD FORT LAUDERDALE, FL 33304

SUBJECT: CASTILLO GRAND HOTEL CONDOMINIUM RESIDENCES

ASSOCIATION, INC.

Ref. Number: N07000001410

We have received your document for CASTILLO GRAND CONDOMINIUM RESIDENCES ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type/print clearly.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 013A00022493

Articles of Amendment to

Articles of Incorporation with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	Title	Name	Address
1) Change	<u>m.</u>	Daniel Brice	<i>p</i>
Add Remove			Blad. Feet Lad
2) Change			元 333-7
Add	100000000000000000000000000000000000000		
Remove 3) Change	DP	Gary ash	25 Bloming de 2d.
Add Remove			Hilaxille, NY 11801
4) Change Add	DP	Stere Rosen	Exclusive Peserts 1515 Arapahae St. Ther 3 - Site 300
Remove			Dever Co 80202
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
(attach additional sheets, if necessary).	(Be specific)				
`					
	 				
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The date of each amondment(s) adoption	on:	, if other than the
date this document was signed.	•	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	
There are no members or members e adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
Dated Of	24, 2013	
Signature		
(By the chairman of have not been sel	or vice chairman of the board, president or other officer-if directors ected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
Manager (Typ	ed or printed name of person signing)	
Dieto	R Deidea	
	(Title of person signing)	